FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

| (Print or Type Responses) | | | | | | | | | |
|--|---|--------------------|---|-----------------------------------|--|---|--|--|--|
| 1. Name and Address of Report Person * Whitney Scott | n * Requiring S | | | | 3. Issuer Name and Ticker or Trading Symbol ALICO INC [alco] | | | | |
| P.O. BOX 338 | 09/14 | 4/2010 | | Person(s) to | | (| | ndment, Date Filed(Month/Day/Year) | |
| (Street) LABELLE, FL 33975 | | | | DirectorX_ Officer (stille below) | all applicable) 10% Owner 10% Owner Other (specify below) nancial Officer | | f. Individual or Joint/Group Filing(Check Applicable Line)X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | |
| (City) (State) (Z | Zip) | Table | I - N | on-Derivativ | e Securitie | es Ben | eficial | ly Owned | |
| 1.Title of Security (Instr. 4) | | | 2. Amount of Securities Beneficially Owned (Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Alico, Inc., Common Stock \$1.00 | k, Par Value | 0 | | | D | | | | |
| Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exer and Expiration (Month/Day/Year | cisable on Date | 3. Title and Amou | | of 4. | 5. Ownership Se Form of Derivative | nership m of | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | Date Exercisable | Expiration Date | | Amount or Number of Shares | Derivativ Security | Dire or Ir (I) | curity: ect (D) ndirect tr. 5) | | |

Reporting Owners

| Banasting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|-------------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Whitney Scott P.O. BOX 338 LABELLE, FL 33975 | | | Chief Financial Officer | | | |

Signatures

| Scott Whitney | 09/15/2010 |
|-------------------------------|------------|
| Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.